FIRST COAST GUARD DISTRICT TAX PROGRAM QUESTIONNAIRE

PLEASE READ THE FOLLOWING BEFORE SIGNING THE PRIVACY ACT STATEMENT AND ANSWERING THE QUESTIONNAIRE.

1. The US Coast Guard provides tax assistance to members of the Armed Forces on active duty and to other eligible individuals such as family members, retirees and their family members, and civilian employees. Electronic filing for taxpayers receiving refunds is provided at **NO COST** by members of the First CG District Legal Office.

2. Please print clearly. Any mistake can lead to a delay in receiving your refund. To provide the most efficient service possible, it is vital to have complete and correct information. **Social Security Numbers (SSNs) and names must match exactly Social Security cards or processing of your return and any refund will be affected**. Actual Social Security cards are preferred to avoid IRS rejection.

3. Make sure you have all of your W-2s, IRS Forms,1099s stating interest, dividends, capital gains, distributions from pensions & IRAs, unemployment compensation, or miscellaneous income to give to your tax preparer. Amended returns cannot be electronically filed. To claim adjustments, credits, or itemized deductions, have receipts & totaled amounts. For child care credit, make sure you have the employee identification number (EIN) or SSN for the care provider. To claim a dependency exemption, a non-custodial parent should have **IRS Form 8332** (Release of Claim to Exemption for Child of Divorced or Separated Parents), Separation Agreement or Divorce Decree.

4. Your tax return is ultimately your responsibility. Be sure to review your tax return before signing it. Ensure correct names, SSNs, and financial institution's routing and account numbers. Please ask your tax preparer any questions you may have about your tax return and they will be happy to answer them before you sign your tax return.

5. If you intend to electronically file and your spouse is not available to sign the return, make sure you have Power of Attorney specifically authorizing the preparation, signing, and filing of income tax returns. If you use the IRS Form 2848 (Power of Attorney and Declaration of Representative), it does not need to be notarized. If you have any questions, please contact your unit tax adviser or the First District Legal Office at (617) 223-8500 or (617) 223-8017.

Data Required by the Privacy Act of 1974
AUTHORITY: 10 USC 3012.
PRINCIPLE PURPOSE: To assist in preparation of federal income tax returns for electronic filing.
ROUTINE USES: The routine use of tax preparation worksheets is to provide the basic information necessary to prepare the client's federal income tax return for electronic filing.
DISCLOSURE: Voluntary Disclosure. Nondisclosure precludes electronic preparation and filing of the federal income tax return.

Date: ________________________________ **Signature:** ____________________________________

Printed Name: ____

FIRST DISTRICT E-FILE TAX INTAKE FORM

FIRST NAME & MI	LAST NAME on SS Card	SSN
TAXPAYER:		
SPOUSE:		
Reminder: Social Security Numbers and full names must match exactly Social Security cards or your return will be affected		
CURRENT MAILING ADDRESS		

YOUR STATE OF RESIDENCE	YOUR SPOUSE'S STATE OF RESIDENCE

TELEPHONE NUMBERS (If the IRS rejects your electronically filed return, our office will need to be able to contact you)	
HOME:	
WORK:	
MOBILE:	
E-MAIL:	

If you are scheduled to move or have a Permanent Change of Station (PCS) within the next six months, provide your expected move/flight date ____

Mailing Address & Phone # if different from above.	

	YES	NO
Presidential Election Campaign Fund Do you want $3 to go to this fund?		
If a joint return, does your spouse want $3 to go to this fund?		

AGE (as of December 31, 2007)	DATE of BIRTH	OCCUPATION
TAXPAYER:		
SPOUSE:		

*** Advise tax preparer if either taxpayer or spouse is legally blind

FILING STATUS	
	1. **SINGLE** (unmarried on December 31, 2007)
	2**. MARRIED FILING JOINT** (married on December 31, 2007)
	3. **MARRIED FILING SEPARATE** (married on December 31, 2007)

Spouse's name: ____________________________________
SSN: _____________________________
CAUTION: *If you file separately, you CANNOT take credits for earned income, child & dependent care expenses, and educatio*n.

	4**. HEAD OF HOUSEHOLD** (on December 31, 2007, unmarried, or married living apart during **the last six months of the yea**r, with a child who qualifies as a dependent & not filing a joint return **AND** paid more than half the cost of keeping up a home that, for more than half the year, was the main home of a child or other qualified dependent OR an unmarried child who was not a dependent.)
	5. **QUALIFYING WIDOW** (taxpayer has dependent child, paid more than half cost of keeping up a home, widow(er) has not remarried, no more than two years have passed since year of spouse's death) **Date of spouse's death** _________________.

PERSONAL EXEMPTIONS		
CAN YOUR PARENTS (or someone else) CLAIM YOU ON THEIR RETURN AS A DEPENDENT?	**YES**	**NO**
***CAUTION**: they may be able to claim you if at the end of the year you were under 19 or under age 24 and a full time student*		

DIRECT DEPOSIT INFORMATION If you want direct deposit of your refund, make sure you have a check with you so that we may confirm your bank's routing transit number. (Deposit slips, ATM cards & LESs may not have the necessary information)		
Financial Institution:		
Routing #:		
Account #:		**CHECKING or SAVINGS**
If the amount you owe or the amount you overpaid is large, you may want to file a new IRS Form W-4 with your employer (personnel office for military) to change the amount of federal or state income tax withheld from your 2007 pay.		

INCOME	**YES**	**NO**
DID YOU HAVE **WAGES, SALARIES, TIPS**? If yes, provide **Copy B of all W2s**		
DID YOU HAVE **STUDENT LOAN REPAYMENT** BY MILITARY? If yes, provide **Copy B of W2**		
DID YOU HAVE BANK OR CREDIT UNION **INTEREST** INCOME? If yes, attach form(s) **1099-INT**		
DID YOU HAVE **DIVIDEND** INCOME? If yes, attach form(s) **1099-DIV**		
DID YOU RECEIVE DISTRIBUTIONS FROM **PENSIONS, RETIREMENT, or IRA**s? If yes, provide form(s) **1099-R**		
DID you receive **REFUND OF STATE/LOCAL TAXES** & itemize your last year's tax return? If yes, attach form(s) **1099-G**		
DID YOU **RECEIVE ALIMON**Y? If yes, provide total amount received for year: $_______________		
WERE YOU/SPOUSE **SELF-EMPLOYED** IN 2007? If yes, attach form(s) **1099-MISC** & totaled income/expenses.		
DID YOU **SELL** ANY **STOCKS** OR **MUTUAL FUNDS**? If yes, attach form(s) **1099-B** & purchase date / basis and sell date/sale amount		
DID YOU/SPOUSE **CONVERT A REGULAR IRA** TO ROTH IRA? If Yes, provide form(s) 1099-R and, if you had prior nondeductible contributions, attach prior year's IRS Form **8606'**s		

TAXPAYER:	$__________ converted, Pre-conversion basis $________ Total nondeductible contributions before conversion $________
SPOUSE:	$__________ converted, Pre-conversion basis $________ Total nondeductible contributions before conversion $________

	YES	**NO**
DID YOU **SELL** YOUR **HOME** in 2007? If yes, indicate date of sale: ___________. You may be able to exclude gain from sale of residence if you owned & lived in home at least 2 out of the last 5 years.		
ARE YOU A **LANDLORD** WITH RENTAL INCOME/EXPENSES? If YES, attach totaled rent received, expenses, including FORM **1098** (Mortgage Interest Statement), & depreciation information.		
DID YOU RECEIVE **UNEMPLOYMENT COMPENSATIO**N? If yes, attach **1099-G** or list amount $ _____________________________		

	YES	NO
DID YOU/SPOUSE WORK OUTSIDE THE MILITARY in 2007? If **YES** provide W-2		
COMBAT ZONE: DID YOU SERVE IN THE PERSIAN GULF, AFGHANISTAN OR IN THE QUALIFIED HAZARDOUS DUTY AREA OF BOSNIA, CROATIA, HERZAGOVINA, MACEDONIA, SERBIA/MONTENEGRO, ALBANIA OR THE ADRIATIC SEA, and OR IONIAN SEA (north of the 39th parallel) IN 2007? Deployed _______________ Redeployment Date: _________________		
ADJUSTMENTS	**YES**	**NO**
DID YOU/SPOUSE CONTRIBUTE TO A **TRADITIONAL or REGULAR IRA** (not a Roth or Educational) 2007 IRA OR INTEND TO CONTRIBUTE BY APRIL 15, 2007? NOTE: Beginning in 1998, eligibility amount for IRA deduction increased. Also, although service members are covered by a retirement plan, their spouses not covered by a retirement plan can take full contribution.		
TAXPAYER CONTRIBUTION:	$	
SPOUSE CONTRIBUTION:	$	
DID YOU PAY **STUDENT LOAN INTEREST**? If yes, attach form 1098-E (Student Loan Interest).		
DID YOU **PAY ALIMONY**? If yes, provide annual amount: $_________________ Recipient's SSN: _____________________________ **NOTE:** Child support payments are NOT alimony & are neither deductible by the payer, nor taxable to the payee.		
DID YOU/SPOUSE HAVE **UNREIMBURSED MOVING EXPENSES?** (amounts in excess of DLA) in 2007?		

CHILDREN & OTHER DEPENDENTS:

Reminder: SSNs and full names must match Social Security cards exactly

OF CHILDREN WHO LIVED WITH YOU: ______________________________________

OF CHILDREN WHO DID NOT LIVE WITH YOU DUE TO SEPARATION OR DIVORCE THAT YOU CAN CLAIM AS EXEMPTION: ______________.
(Non-custodial parent should have IRS Form 8332, Release of Claim to Exemption for Child of Divorced or Separated Parents; a Separation Agreement; or, Divorce Decree to claim exemption.)

OF OTHER DEPENDENTS: __________________

Dependent's First & Last Name (Do not list spouse as dependent)	**SSN**	**RELATIONSHIP**	**# of Months in Home in 2007**	**DOB**	**S/D**

ENTER "**S**" for student or "**D**" for disabled in far right column above if dependent is over 18 and either a student or disabled.

# of children who lived with you for whom you **CANNOT** claim dependency exemption due to Separation or Divorce _________. (concerns Qualifying Child Status for Earned Income Credit)

CREDITS: The child tax credit is as much as $1000 for each qualifying child who was under age 17 at the end of 2007.

CHILD AND DEPENDENT CARE EXPENSES:

PROVIDER'S NAME	**ADDRESS**	**SSN/EIN**	**AMOUNT PAID**

IF MARRIED FILING JOINT RETURN AND YOU HAD CHILD AND DEPENDENT CARE EXPENSES - WAS YOUR SPOUSE A FULL-TIME STUDENT (5 MONTHS OR MORE) OR NOT ABLE TO CARE FOR HIM/HERSELF?	**YES**	**NO**
EDUCATION CREDITS		
If you (or dependent) paid expenses in 2007 for yourself, your spouse, or dependent to enroll in or attend the first 2 years of post-secondary education, you may be able to take the Hope Credit. Other students may qualify for Lifetime Learning Credit. To claim credit, attach form(s) 1098-T, list expenses paid $________. Indicate - Hope Lifetime	**HOPE**	**LIFETIME**
COVERDELL EDUCATION SAVINGS ACCOUNTS (ESA) and SECTION 529 PLANS:	**YES**	**NO**
Did you contribute to any Coverdell Education Savings Accounts or Section 529 Plans? If so, the amount? ___________________________________		
Did you make any withdrawals from a Coverdell ESA or Section 529 Plans for Education costs in 2007? If so, the amount? ___________________________		
If YES - the student's name____		
Any withdrawals for non-education expenses? ____		
TEACHER SUPPLIES CREDIT	**YES**	**NO**
Are you a teacher?		
Did you spend any of your own money for classroom supplies?		
If so, the amount? ____		
RESIDENTIAL ENERGY EFFICIENCY CREDIT – Did you purchase any energy efficient equipment such as a furnace, hot water heater, insulation or windows? If yes, please bring receipts, description, and efficiency ratings.	**YES**	**NO**
CHARITABLE CONTRIBUTIONS? - If you are itemizing deductions, provide preparer with totaled cash/check & non-cash/check gifts to charity	**YES**	**NO**
OFFSET -- If married filing joint return, is one spouse obligated to pay federal debt or past due child/spousal support which the IRS may seek to offset against the refund?	**YES**	**NO**
ESTIMATED PAYMENTS DID YOU MAKE ANY ESTIMATED PAYMENTS? If yes, total:____	**YES**	**NO**
Thank you for using the First CG District Tax Program. **Customer Satisfaction Surveys are available for any comments, complaints, or compliments.** **Lower portion to be completed by program staff.**		

Reverse can be used for additional information, notes, or questions

System number/DCN: _______________________ Preparer's last name:_____________________________

Notes, Questions, Additional Information: